

Please type a plus sign (+) inside this box → ☒

PTO/SB/  
Approved for use through 10/31/2002. OMB

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

First Named Inventor

ANTONIO MUGICA

**COMPLETE IF KNOWN**

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD TO BUILD A CONTROL SYSTEM BASED ON CONTROL CELLS**

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or invention certificate, or 365(a) of any PCT international application which designated at least one country other than the United States or America, listed below and have also identified below, by checking the box, any foreign application for patent or invention certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any

Please type a plus sign (+) inside this box → ☒

Approved for use through 10/31/2002

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it carries a valid OMB

## DECLARATION — Utility or Design Patent Application

Official correspondence to:

☐ Customer Number  
or Pay Code Label

OR

☐

Correspondence address

Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information are believed to be true, and further that these statements were made with the knowledge that willful false statements are made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may invalidate the grant of any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR

☐ A petition has been filed for this unsigned

Given Name

ANTONIO

Family Name

MUGICA

(first and middle, if any)

or Surname

Inventor's

Signature

Date

Residence City

Boca Raton

State

FL

Country

U.S.A.

Citizenship

Venez

Mailing Address

19591 Pinne Key Drive

Mailing Address

City

Boca Raton

State

FL

ZIP

33498

Country

U.S.

NAME OF SECOND INVENTOR

☐ A petition has been filed for this unsigned

Given Name

CARLOS

Family Name

ALONSO

(first and middle, if any)

or Surname

Inventor's

Signature

Date

7/11/12

Residence City

Caracas

State

Country

Venezuela

Citizenship

Venez

Mailing Address

Av. Casanova, c/ Baldo

Mailing Address

Edif. Atentida, 41

Venezuela



0952057-021701

Print type & date (if more than one) → ☒ Xb

Approved through 10/31/2002  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR</b> Supplemental Sheet Page 1 of 1
--------------------	---

Name of Additional Joint Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsolicited invention	
Given Name (first and middle, if any)		Family Name or Surname	
ROGER		PINATE	
Inventor's Signature	Date		
Residence: City	State	Country	Citizenship
Caracas		Venezuela	
Mailing Address			
Transversal 22, Qta. Que Felices, San			
Mailing Address			
Montalban			
City	State	ZIP	Country
Caracas			Venezuela
Name of Additional Joint Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsolicited invention	
Given Name (first and middle, if any)		Family Name or Surname	
PAUL		BASIO	
Inventor's Signature	Date		
Residence: City	State	Country	Citizenship
Caracas		Venezuela	Vene
Mailing Address			
Ave. Rosales, Transversal 10			
Mailing Address			
Qta. Anna Micheli, Los Cheros			
City	State	ZIP	Country
Caracas			Venezuela
Name of Additional Joint Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsolicited invention	
Given Name (first and middle, if any)		Family Name or Surname	
Inventor's Signature	Date		
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			